

This is to acknowledge that you have filed a Notification of Regulated Waste Activity for the installation located at the address shown below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation is identified below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Biennial Reports that generators of hazardous waste, and owner and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA ID No.:
PAR000501320

Installation Address:
3000 E ONTARIO ST
FACILITY AREA
PHILADELPHIA PA 19134

Mailing Address:
PETROLEUM RECYCLING CORP
PO BOX 68
PHILADELPHIA PA 19134
ATTN: STUART PAUL, PRES

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Please refer to Section V. Line-by-Line Instructions for Completing EPA Form 8700-12 before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).		<h2 style="margin: 0;">Notification of Regulated Waste Activity</h2> <div style="display: flex; align-items: center; justify-content: center;"> <div> United States Environmental Protection Agency </div> </div>				Date Received (For Official Use Only)	
I. Installation's EPA ID Number (Mark 'X' in the appropriate box)							
<input checked="" type="checkbox"/> A. Initial Notification		<input type="checkbox"/> B. Subsequent Notification (Complete Item C)		C. Installation's EPA ID Number <div style="border: 1px solid black; padding: 2px; display: inline-block;"> P A R 0 0 0 5 0 1 3 2 0 </div>			
II. Name of Installation (Include company and specific site name) PETROLEUM RECYCLING CORP.							
III. Location of Installation (Physical address not P.O. Box or Route Number)							
Street 3000 EAST ONTARIO STREET							
Street (Continued) Facility Area							
City or Town PHILADELPHIA				State PA	Zip Code 19134-		
County Code 101	County Name PHILADELPHIA						
IV. Installation Mailing Address (See instructions)							
Street or P.O. Box P.O. BOX 68							
City or Town SOUTHAMPTON				State PA	Zip Code 18966-0068		
V. Installation Contact (Person to be contacted regarding waste activities at site)							
Name (Last) PAUL			(First) STUART				
Job Title PRESIDENT			Phone Number (Area Code and Number) 215-291-9400				
VI. Installation Contact Address (See instructions)							
A. Contact Address Location <input type="checkbox"/> Mailing <input checked="" type="checkbox"/>		B. Street or P.O. Box P.O. BOX 68					
City or Town SOUTHAMPTON				State PA	Zip Code 18966-0068		
VII. Ownership (See instructions)							
A. Name of Installation's Legal Owner AJC CORPORATION							
Street, P.O. Box, or Route Number 3000 EAST ONTARIO STREET							
City or Town PHILADELPHIA				State PA	Zip Code 19134-		
Phone Number (Area Code and Number) 215-423-9909		B. Land Type <input checked="" type="checkbox"/> P	C. Owner Type <input checked="" type="checkbox"/> P	D. Change of Owner Indicator Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
				Date Changed Month <input type="checkbox"/> Day <input type="checkbox"/> Year <input type="checkbox"/>			

per call us

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions)

A. Hazardous Waste Activities

1. Generator (See Instructions)
- ☐ a. Greater than 1000kg/mo (2,200 lbs.)
- ☐ b. 100 to 1000 kg/mo (220-2,200 lbs.)
- ☐ c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)
- ☐ a. For own waste only
- ☐ b. For commercial purposes
- Mode of Transportation
- ☐ 1. Air
- ☐ 2. Rail
- ☐ 3. Highway
- ☐ 4. Water
- ☐ 5. Other - specify _____
- ☐ 3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity, see instructions.
4. Exempt Boiler and/or Industrial Furnace
- ☐ a. Smelting, Melting, and Refining Furnace Exemption
- ☐ b. Small Quantity On-Site Burner Exemption
- ☐ 5. Underground Injection Control

C. Used Oil Management Activities

1. Used Oil Transporter/Transfer Facility - Indicate Type(s) of Activity(ies)
- ☒ a. Transporter
- ☒ b. Transfer Facility
2. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)
- ☒ a. Processor
- ☐ b. Re-refiner
- ☐ 3. Off-Specification Used Oil Burner
4. Used Oil Fuel Marketer
- ☐ a. Marketer Who Directs Shipment of Off-Specification Used Oil to Used Oil Burner
- ☒ b. Marketer Who First Claims the Used Oil Meets the Specifications

B. Universal Waste Activity

- ☐ Large Quantity Handler of Universal Waste

IX. Description of Hazardous Wastes (Use additional sheets if necessary)

A. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 waste codes.)

1			
7			

2			
8			

3			
9			

4			
10			

5			
11			

6			
12			

B. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24; See instructions if you need to list more than 4 toxicity characteristic waste codes.)

(List specific EPA hazardous waste number(s) for the Toxicity Characteristic contaminant(s))

1. Ignitable (D001) ☐
2. Corrosive (D002) ☐
3. Reactive (D003) ☐
4. Toxicity Characteristic ☐

1			

2			

3			

4			

C. Other Wastes. (State-regulated or other wastes requiring a handler to have an I.D. number; See instructions.)

1			

2			

3			

4			

5			

6			

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature

Name and Official Title (Type or print)

Date Signed

XI. Comments

BAH/BC/01/25/01

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section IV of the booklet for addresses.)

RCRA Site Detail

Report run on: February 20, 2003 - 8:21 AM

Page 3

PAR000501320 PETROLEUM RECYCLING CORP

EPA Region 03 Extract Flag: X Facility Identifier: County: PHILADELPHIA

Universes	Full Enforcement: ----	Subj CA:	Perm Prgrs: ----	Op Pmt GPRA:
Generator: N	Operating TSDF: ----	Subj CA TSD 3004:	Perm Wrkld: ----	PClos GPRA:
Transporter:	BOYSNC:	Subj CA TSD Discr:	Clos Wrkld: ----	CA GPRA:
	SNC:	Subj CA Non-TSD:	Pclos Wrkld: ----	CA HE EI:
	Annual BOY Enf:	CA Wrkld:		CA GW EI:

Activity Location: PA Source Type: Notification Seq. Number: 2 Receive Date: 12 FEB 2001

Other/Previous Site Name: PETROLEUM RECYCLING CORP

Location 3000 E ONTARIO ST
Address: FACILITY AREA (AREA F)
PHILADELPHIA, PA 19134

Mailing 597 GLEN MEADOW RD
Address: RICHMOND, PA 18954

Contact Person STUART PAUL 597 GLEN MEADOW RD
For Source (215) 291-9400 RICHMOND, PA 18954
Information

Owner (current) 3000 E ONTARIO ST Type: Private
AJC CORP PHILADELPHIA, PA 19134
From: 01/01/0001 To: Phone: (215) 802-1170

Land Type: Private Non Notifier: No Commercial Availability: Other - U Tsd Date:
Accessibility: No. Employees: State District:

Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Not a Generator, Verified; State: HQ-N Not a Generator, Verified

Transfer Facility: Unknown

Used Oil Activities

Other Hazardous Waste Generator Activities

Used Oil Transporter Activity Off-Specification Used Oil Burner: No

Importer Activity: Unknown
Mixed Waste Generator: Unknown

Transporter: Yes
Transfer Facility: Yes

Used Oil Fuel Marketer Activity

Transporter Activity: No
TSD Activity: No
Recycler Activity: No

Used Oil Processor and/or
Re-refiner Activity

Marketer who directs shipment
off-specification used oil to
off-specification used oil burner: No

Processor: Yes
Refiner: No

Marketer who first claims the used
oil meets the specifications: Yes

Exempt Boiler and/or Industrial Furnace

Small Quantity Onsite Burner Exemption: Unknown
Smelting, melting, Refining Furnace
Exemption: Unknown

Underground
Injection Control: No Destination Facility for
Universal Waste:

* End of Report *

Petroleum Recycling, Corp.
P. O. Box 68
Southampton, PA. 18966-0068
215-291-9400 Fax 215-942-3955

.....

Facsimile Transmittal

To: Lisa Brannigan , EPA Contractor Fax: 215-814-3114

From: Stuart Paul Date: 1/16/01

Re: Form 8700-12 Pages: 3

CC:

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

.....

Dear Ms. Brannigan,

Petroleum Recycling Corp. is applying for a PADEP Residual Waste Processing Permit for used oil management. We have filled out an 8700-12, attached, and would like an identification number for this proposed location. We are located at 3000 East Ontario Street, Philadelphia, PA. 19134.

Could you please process our request and call us with our new EPA ID# as soon as possible, as we need this number for our permit application to the State.

Sincerely,


Stuart Paul

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EPA ID No.:

PAR000501320

Installation Address:

PETROLEUM RECYCLING CORP
3000 E ONTARIO ST
FACILITY AREA (AREA F)
PHILADELPHIA, PA 19134

Mailing Address:

597 GLEN MEADOW RD
RICHMOND, PA 18954

Attn: STUART PAUL, PRES

Please refer to Section V. Line-by-Line Instructions for Completing EPA Form 8700-12 before completing this form. The information requested here is required by law (Section 3018 of the Resource Conservation and Recovery Act).



Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☒ A. Initial Notification

☒ B. Subsequent Notification
(Complete Item C)

C. Installation's EPA ID Number

PAR000501320

II. Name of Installation (Include company and specific site name)

PETROLEUM RECYCLING CORP

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

3000 E. ONTARIO STREET AREA F

Street (Continued)

City or Town

PHILADELPHIA

State

Zip Code

PA 19134-

County Code

County Name

101 PHILADELPHIA

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

597 GLEN MEADOW ROAD

City or Town

RICHBORO

State

Zip Code

PA 18954-

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

(First)

PAUL

STUART

Job Title

Phone Number (Area Code and Number)

PRESIDENT

215-291-9400

VI. Installation Contact Address (See Instructions)

A. Contact Address
Location Mailing

B. Street or P.O. Box

City or Town

State

Zip Code

VII. Ownership (See Instructions)

A. Name of Installation's Legal Owner

ARTHUR J. COLA, INC.

Street, P.O. Box, or Route Number

3000 E. ONTARIO STREET

City or Town

PHILADELPHIA

State

Zip Code

PA 19134-

Phone Number (Area Code and Number)

B. Land Type

C. Owner Type

D. Change of Owner
Indicator

Date Changed
Month Day Year

215-802-1170

P

P

Yes

No

01/09/2001

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to Instructions)

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C. Used Oil Management Activities

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Mode of Transportation

- ☐ 1. Air
- ☐ 2. Rail
- ☐ 3. Highway
- ☐ 4. Water
- ☐ 5. Other - specify _____

- ☐ 3. Treater, Storer, Disposer (at Installation) Note: A permit is required for this activity, see Instructions.
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A. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See Instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
7	8	9	10	11	12

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(List specific EPA hazardous waste number(s) for the Toxicity Characteristic contaminant(s))

1. Ignitable (D001)	2. Corrosive (D002)	3. Reactive (D003)	4. Toxicity Characteristic
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. Other Wastes. (State-regulated or other wastes requiring a handler to have an I.D. number; See Instructions.)

1	2	3	4	5	6

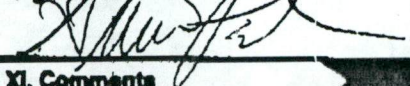
X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature

Name and Official Title (Type or print)

Date Signed



STUART PAUL, President

2-12-2001

XI. Comments

Bah/LB/2.12.01

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section IV of the booklet for addresses.)

PETROLEUM RECYCLING, CORP.
3000 E. ONTARIO STREET, PHILADELPHIA, PA 19184
215-291-9400 * FAX 215-291-9228

FACSIMILE TRANSMITTAL SHEET

TO:	FROM:
Lisa Branagan	Stuart Paul
COMPANY:	DATE:
E.P.A.	2/12/01
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
215-814-3114	3
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
215-814-3413	
RE:	YOUR REFERENCE NUMBER:
EPA ID #	

☒ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☒ PLEASE REPLY ☐ PLEASE RECYCLE

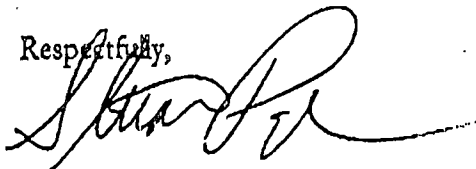
NOTES/COMMENTS:

Dear Lisa;

The purpose of this fax is to obtain an EPA ID# for my facility. Should you have any questions I can be reached at the number listed above.

Thank you for your assistance.

Respectfully,



Stuart Paul

215-291-9400 * FAX 215-291-9228